SC Ryan White Case Management Training

How to track Referrals in Client Level Data.

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Presentation Notes

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  - Referral Training PPT 1.0

    - PE Version 4.2

      - Feb 23, 2009

What is a Referral?
Depends on who is asking…

- **Ryan White funders (HRSA) definition:**
  - "aa. *Referral for health care/supportive services* is the act of directing a client to a service in person or through telephone, written, or other type of communication. Referrals may be made within the non-medical case management system by professional case managers, informally through support staff, or as part of an outreach program. "

  Click link below for other HRSA Definitions: Ryan White Services Definitions:

  http://www.scdhec.gov/health/disease/stdhiv/rwpartb.htm

- **SC Case Management Standards 2007:**

  - *"CM 2.3 Referral Tracking:* Referral tracking should be done for all Ryan White core services, including Substance abuse, mental health, medical and dental referrals. Referrals to other agencies can also be tracked as program capacity allows. All required referrals should be followed up within thirty (30) days. Factors impacting the required time to follow-up include the urgency of the needed service, referral agencies' procedures, etc."

  Click link below for other SC CM Standards Definitions: SC CM Standards 2007:

  http://www.scdhec.gov/health/disease/stdhiv/rwpartb.htm

What to document as a Referral in simple terms.

- Linkage to services including:

   - *All* services at no cost to your agency (HRSA).

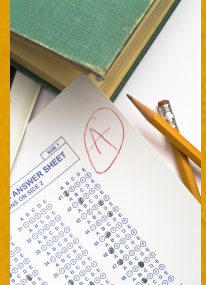   - Core services for which your agency may charged.

So why not track them *all*?

Documenting the Referral Continuum:

- - "Aren't these Services Provided capturing Referrals?"
    - *Connection to Core Service*
    - *Connection to Medical Care*
    - *Connection to Supportive Services*

- "Not completely":

- These are services to document *time* spent *linking* clients to other services.

- Entering these allows CM's to report their time and visits to make Referrals.

- Typically reported as CM Medical or Non Medical.

Getting more picture in a snapshot.
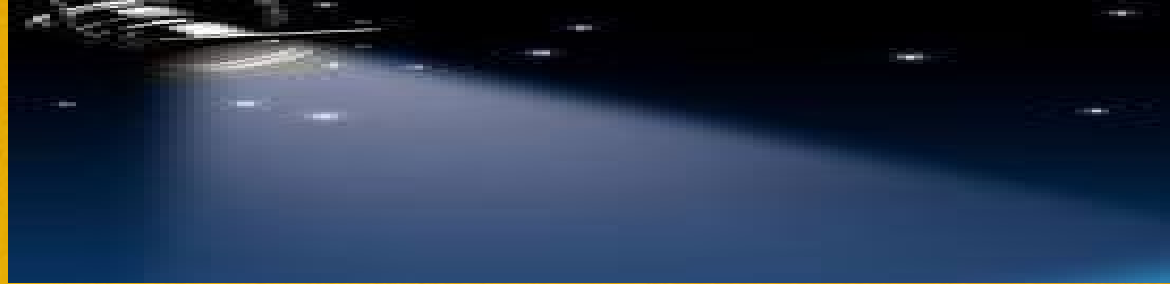
Partially documented Referral reports like a brochure stand.

To

Fully documented referred shows CM linking client to a variety of providers and following up!

From..

Reporting it all in Client Level Data

- Referral related data on HRSA Client Level Reports:

Data Elements for Client-level Data Export (Submitted to OMB)

A client report must be submitted by all agencies that provide services directly to clients. This document outlines the data fields that will be submitted in the XML file. The client report will contain one de-identified record for each client who received a Ryan White HIV/AIDS Program-funded core medical service or support service during the reporting period.

*OMB = Federal Office of Management and Budgets (www.**whitehouse.gov/omb**).

Field #	Variable Description	Coding	Rationale[1]
2.	What was the client's vital enrollment status <u>at the end of this reporting period</u>?	Active, continuing in program Referred to another program or services, or became self-sufficient Removed from treatment due to violation of rules Incarcerated Relocated Deceased Unknown	Necessary to track enrollment or vital status over the course of the reporting period Informs the denominator of other items
41.	Received Referral for health care/supportive services <u>each quarter during this reporting period</u>	Yes No Unknown ___ ___	Accountability, use of funds 2006 Ryan White Legislation requirement

What the Referral form looks like in PE for SC.

Action Plan
Allergy
Appointment
Diagnosis
Discharge
Drug
Graphs HIV
Group Session
Hospitalization
Lab Panel
Letter
Program Enrollment Housing
Progress Log
Referral
Report
Service Provided
Service Request
Substance Use
Symptom
Test Result
Treatment History
Vaccination

File   Find   View   Actions   Tools   Reports   Windows   Help

Close   ✓ Submit   Print

Referral : Christal Fake ()
ACCESS Network Inc. - Case Management : Christal Davis/STDHIV/DHEC/SCGOV[02/22/2009]

Referral

Reminder: Use a Service Provided record if you will be paying for the Service.

Referral Status	* Pending
Referring Person	* Christal Davis
Referral Date	* Sunday February 22, 2009
Referred to Organization	
Referred to Provider	
Referred for Service Type	*
Funding Source	Ryan White
Referred for Service Description	
Referral Appointment Date	
Date Check Back	
Responsible Party	Christal Davis

If this form is not under "Create – Activity", email SC DHEC for "help" in Lotus Notes. (RWHOPWA TA Help/ DHEC/SCGOV)

Referral Form Fields:

*Required Fields are Indicated with an " * "*

* **Referral Status**: This is a system assigned field and will not change until click of "Submit". *On click of "Submit ," Status will change to Submitted.*

* **Referring Person :** Defaults to user logged in PE. This field represents the person who initiates the Referral process; typically this should be the person who spends the most time in the Referral process.

* **Referral Date:** This should be the date that the linkage was made. Note a client may have several referrals for the same type of service over the continuum of care.

* **Referred to Organization:** Choose the agency to which the client will go to obtain the linked service. If additional Organizations need to be added, click the link below for the <u>Organization Import Template</u> to submit to GTI:

   http://www.scdhec.gov/health/disease/stdhiv/ta.htm

*Required Fields are Indicated with an " * "*

- **Referred to Provider:** Choose the name of the individual who will manage the clients care at the Referred to organization. *Note this is not required.*

* **Referred for Service Type:** Choose the most appropriate category of services to which the client is being referred. *Note: This field is for internal tracking only. All Referrals will be counted as Referral for Health Care – Supportive services on RDR and RSR(Client level Reporting).*

* **Funding Source:** This field should indicate the grant paying for the CM's time spent to link the client to service. *Note : Future enhancements may allow distinction for the funder actually paying for the service.*

- **Referral Appointment Date:** Indicate the date of appointment for the linked service. *If available.*

* **Date to Check Back:** This is the date upon which triggers will be based to remind the Responsible party to update the Referral form (linkage) status.

* **Responsible party:** This should be the person responsible for updating the status of the appointment. * *When triggers and required actions are certified by SC DHEC, this will be the person receiving reminders.*

Complete the fields and click Submit:

- Click "Submit" when all "required fields" are entered: Referral Status: Changes to "Submitted".

- Come back and update disposition according to the following below.

- Disposition: Enter the disposition according to the mapping below:
  - *Approved = Kept Appointment*
  - *Partial Approved = Rescheduled*
  - *Rejected = Referral was not approved*
  - *No Client Follow-up = Missed*
  - *Unknown = CM attempted follow-up but was unable to obtain an update*
  - *If unknown exists, indicate reason unable to follow-up in **Disposition Comments.***
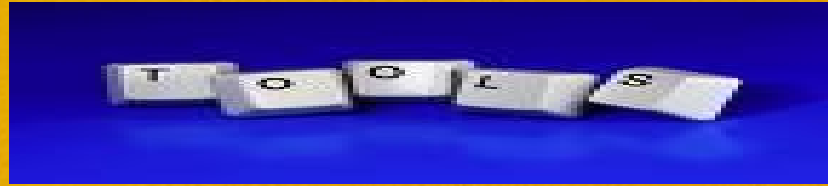
Upcoming Referral Enhancements:

- Add field(s) to tell PE linked services is:
  - Free to your agency or Charged to Your Agency

- Change Disposition to :
  - Kept
  - Missed
  - Not approved
  - Rescheduled

- Modify required actions or reminders from Referral form.

- Enhance Referral reporting.

Technical Assistance Tools and Resources

- SC DHEC Enhanced TA Website: www.scdhec.gov/rwhopwata

- GTI Help Desk:
  Lotus Notes Email at "*Provide Help/GTI*"

- RW HOPWA TA Help Desk:
  Lotus Notes Email at "RWHOPWA TA Help/DHEC/SCGOV".

- Present written issues to agency representative in:
  - SC Part B Peer Review
  - SC Part B CM Workgroup